

APPLICATION DATA SHEET

10/527470  
DT15 Rec'd PCT/PTO 51.0 MAR 2005

APPLICATION INFORMATION

Application Type::

REGULAR

Subject Matter::

UTILITY

CD-ROM or CD-R?::

NONE

Title::

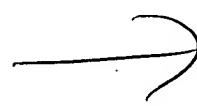
NOVEL COMPOSITIONS AND

METHODS FOR THE TREATMENT OF

IMMUNE-RELATED DISEASES

Attorney Docket Number::

P1976R1



## INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Henry  
Family Name:: Chiu  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 2334 20th Avenue  
City of Mailing Address:: San Francisco  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94116

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Hilary  
Family Name:: Clark  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1504 Noe St.  
City of Mailing Address:: San Francisco  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94131

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Kathryn  
Family Name:: Dennis  
City of Residence:: Santa Clara  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1360 Via Dondera  
City of Mailing Address:: Santa Clara  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 95051



Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Sherman  
Family Name:: Fong  
City of Residence:: Alameda  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 19 Basinside Way  
City of Mailing Address:: Alameda  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94502

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Jill  
Middle Name:: R.  
Family Name:: Schoenfeld  
City of Residence:: Ashland  
State or Province of Residence:: OR  
Country of Residence:: US  
Street of Mailing Address:: 680 Spring Creek Drive  
City of Mailing Address:: Ashland  
State or Province of Mailing Address:: OR  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 97520

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: P.  
Middle Name:: Mickey  
Family Name:: Williams  
City of Residence:: Half Moon Bay  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 509 Alto Avenue  
City of Mailing Address:: Half Moon Bay  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94019



Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: William  
Middle Name:: I.  
Family Name:: Wood  
City of Residence:: Cupertino  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 15060 Montebello Road  
City of Mailing Address:: Cupertino  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 95014

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: US  
Status:: FULL CAPACITY  
Given Name:: Thomas  
Middle Name:: D.  
Family Name:: Wu  
City of Residence:: San Francisco  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 41 Nevada Street  
City of Mailing Address:: San Francisco  
State or Province of Mailing Address:: CA  
Country of Mailing Address:: US  
Postal or Zip Code of Mailing Address:: 94010

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 09157

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 00000

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/028253	09/10/03
PCT/US03/028253	119(e) of	60/410167	09/11/02

## FOREIGN PRIORITY INFORMATION

### ASSIGNMENT INFORMATION

Assignee Name::	Genentech, Inc.
Street of Mailing Address::	1 DNA Way
City of Mailing Address::	South San Francisco
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94080